Quasi-static Frontal Loading of the Thorax of Human Cadavers and the Hybrid III Dummy

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ABSTRACT

The purpose of this study was to determine quasistatically the stiffness and deformation of the human thorax at three sternum and three rib locations. Two unembalmed human cadavers and the Hybrid III Dummy were loaded quasistatically in an A-P (anterior-posterior) direction on the anterior surface of the thorax at six different locations; upper, middle and lower sternum, and upper, middle, and lower right ribs (Figs. 1A & 1B). The A-P deformation of the thorax was simultaneously measured with linear pots at these rib and sternum locations during the loading. The results of these tests show: using a 25.4 mm (one inch) stroke, the stiffness of the human thorax was 6 to 10 N/mm at the sternum and 3.5 to 6 N/mm at the ribs, 2) with the same stroke the stiffness of the Hybrid III was 26-44 N/mm at the sternum and 32-73 N/mm at the ribs, 3) the mid-sternum force-deflection curves for the cadaver, fit a second order linear equation, and were comparable to those obtained in live subjects in a study by Tsitlik et al (1) using CPR techniques, 4) each load was repeated with the rate of loading increased from 1.7 to 102 N/mm (0.067 to 4.0 in/s), and thus far the increased loading rate has not shown consistent increase in stiffness or energy dissipation.

METHODOLOGY

The subject was mounted in a supine position in a support frame fabricated of Unistrut and aluminum plate (Fig. 2). The subject was loaded at each of six load locations with an Instron Model 1321 testing machine, in which a triaxial load cell was incorporated into the loading head. Deflection of the chest and of the loading head were measured with Novotechnik

potentiometers, model # 75, which have elastomeric damped wipers, 75 mm stroke range and 0.002 mm resolution. Loads were transferred from the Instron actuator to the subject via a 6" I beam.

Two support conditions were studied: 1) In the first, only the subject's spine was supported at the thoracic, lumbar and sacral levels. This allowed the posterior portion of the rib cage to deflect posteriorly as loads were applied anteriorly. Ribs deflection was measured on the left side only as symmetry was assumed with mid-line sternal loading (Fig. 3A). 2) In the second support condition, the subject's spine and posterior ribs were supported, loads were applied at both the sternum and the ribs, and deflections were recorded at both left and right ribs as well as the sternum. In this second support condition the posterior ribs were supported so that when the ribs were loaded, the chest would not rotate under eccentric loading (Fig. 3B). The ribs were supported continuously on gimbled plates mounted to threaded rods attached to two 51 x 51 mm (2 x 2 inch) steel box beams running parallel to and bilateral to the spine. These rib support beams were placed approximately 70 mm lateral to midline.

Table 1 shows the tests run to date.

TABLE 1

TEST NO.	TEST DATE	TEST SUBJECT	RUN NOS.	SUPPORT CONDITIO	N
AATD1 AATD2 AATD3 AATD4 AATD5	2-22-88 2-23-88 4-01-88 4-25-88 7-07-88	HYBRID III * CAD. #986 HYBRID III HYBRID III # CAD. #115	1-11 1-10 T1-T11, 1-15 T1-T8, 1-18 1-30	SPINE SPINE, RIBS SPINE SPINE, RIBS SPINE, RIBS	

*CAD. #986: 29 yr old male, ht: 1.73 m, wt: 70.3 kg #CAD. #115: 57 yr old male, ht: 1.79 m, wt: 57.6 kg In initial tests (AATD1, AATD2), the subjects were used to evaluate the apparatus and to determine practical loading rates. After some modifications to the apparatus, the dummy and the second cadaver were then run under identical support conditions with 25.4 mm strokes applied to the sternum and ribs at loading rates of 1.7 and 102 mm/s (0.067 and 4 in/s) (AATD3, 4, and 5). Two-inch strokes were attempted but caused rib fracture and were therefore discontinued. Upper and mid-sternum stiffness data is presented for both cadaveric tests (AATD2 and AATD5). Other cadaveric stiffness and deflection data is presented for AATD5 only, as this can be directly compared to the Hybrid III data in tests AATD3 and AATD4.

RESULTS

The results of these studies indicate the following:

THORACIC STIFFNESS (See Tables 2 and 3)

- 1) The human thorax is stiffer under sternal loading than under rib loading (sternum: 5.9-11.4 N/mm vs. ribs: 3.4-5.8 N/mm). The Hybrid III thorax is less stiff under sternal loading than rib loading (sternum: 26-44 N/mm vs. ribs: 32-73 N/mm). Under sternal loading, the Hybrid III dummy is approximately three to five times as stiff as the cadaver, and under rib loading, six to fourteen times as stiff.
- 2) Increasing the loading rate from 1.7 to 102 mm/s (a sixty-fold increase) did not consistently result in an increase in thoracic stiffness of the cadaver but did so in the dummy.
- 3) The loading portion of the force-deflection curve of the human cadaver could usually be fit to a second-order non-linear curve, while the Hybrid III reponse was almost linear. The cadaveric response also showed more

energy absorption. (See Figures 4A-4C). The mid-sternal, second order curve for the AATD2 and AATD5 cadavers is close to the average curve obtained by Tsitlik et al (1) in perfoming CPR on eleven live human subjects (Fig. 5).

THORACIC DEFORMATION (See Tables 4 and 5)

- 1) Under sternal loading the A-P rib deflection of the human cadaver was 6 to 63% of the applied sternal stroke, while the rib deflection of the Hybrid III dummy was 27 to 60% of the applied stroke.
- 2) Under rib loading, the ribs contralateral to the side of loading in the human cadaver had an A-P delfection of 0 to 14% of the applied stroke, and in the Hybrid III dummy 9 to 31% of the applied stroke.
- 3) Under sternal loading, the posterior ribs of the cadavers deflected less than 5% of the applied stroke and in the dummy 8 to 10%.

CONCLUSIONS

In conclusion, the human cadaveric thorax is much more compliant than that of the Hybrid III under quasi-static loading. It is assumed that much of this is due to the difference in material properties of the ribs of the human skeleton vs. the Hybrid III. It is also hypothesized that the material properties of the costal cartilage contribute greatly to the less stiff response seen in the human cadaver. Preliminary finite element analysis by a graduate student Shijie Ruan of a two-dimensional closed hoop acting as a compression ring with a 4" length of cartilagenous tissue inserted on either side of the sternum decreased the stiffness from 20.2 N/mm to 3.1 N/mm when compared to a closed hoop with bone material properties at the costal cartilage location. The lack of a cartilaginous rib material in the Hybrid III anterior chest wall probably contributes to the stiffer response and more uniform rib deflection seen in the Hybrid III.

REFERENCES

1. Tsitlik JE, Weisfeldt ML, Chandra N, Effron MB, Halperin HR, Levin HR: Elastic properties of the human chest during cardiopulmonary resuscitation. Critical Care Medicine 11:685-692, 1983.

ACKNOWLEDGEMENTS

We wish to acknowledge Lawrence W. Schneider of the University of Michigan Transportation Research Institute for his valuable input into the test methodology. This project was supported by NHTSA grants DTNH22-83-C-7019 and DTNH22-83-C-7005.

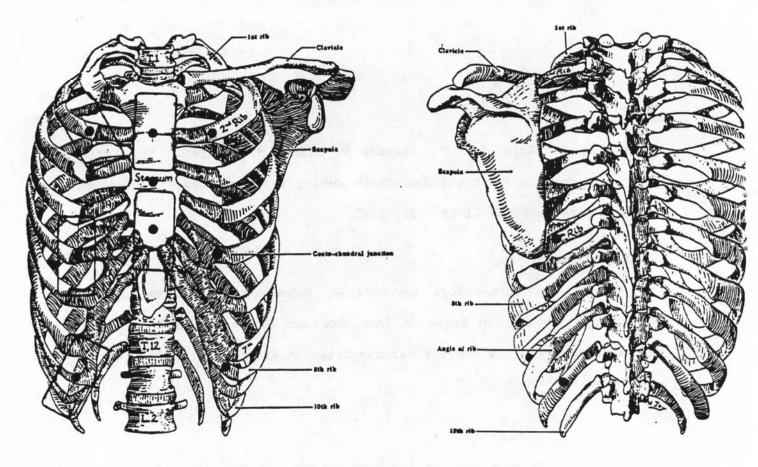


Figure 1A. Load locations (rectangles), and potentiometer locations (dots) as used in the cadaveric chest compression tests. The sternum was also loaded at mid-sternum (rectangle not shown for clarity).

	US=UPPER STERMUM
	MS=NID-STERMUM
LEFT	LS=LOWER STERMUM
	UR=UPPER RIB
USUR	MR=MID-RIB
1	LR=LOMER RIB
	HYBRID III: FRONT RIB POTENTIONETER LOCATIONS ARE AS SHOWN.
MS	(LOAD LOCATIONS ARE AT THE 3 STERNUM AND
	3 RIGHT RIB POTENTIOMETER LOCATIONS).
: LS	HYBRID III: BACK RIB POTENTIOMETER LOCATIONS: NOME IN AATD4. AT LEFT UR, MR, AND LR IN AATD3.
	US

Fig. 1B. The Hybrid III load and potentiometer locations were similar: first, third and sixth ribs and upper, middle, and lower sternum.

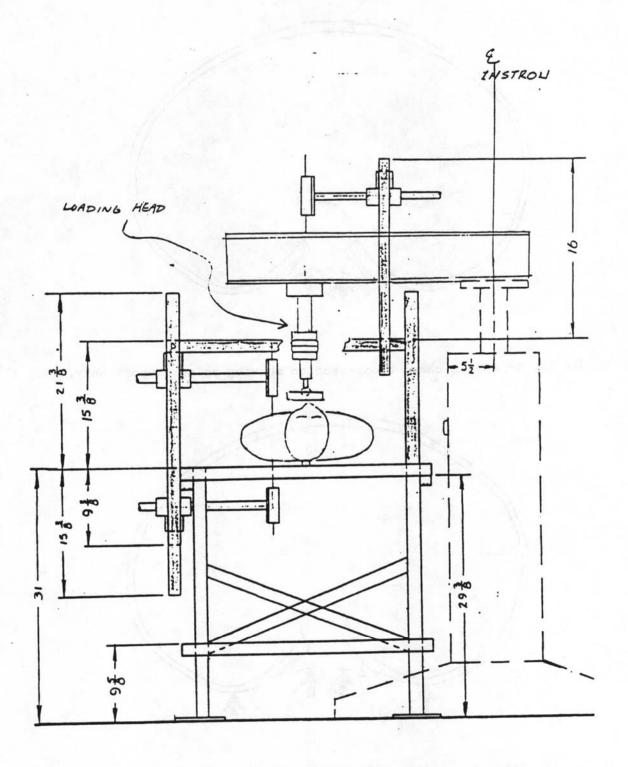


Figure 2. Unistrut support frame, Instron testing machine, and loading head.

(Dimensions in inches)

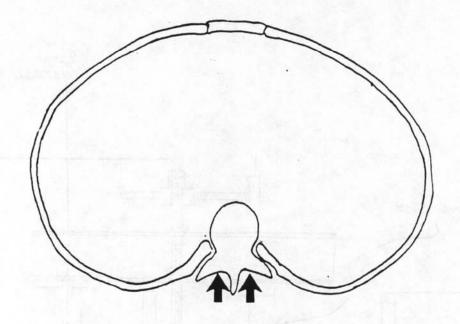


Figure 3A. Schematic chest cross-section showing spine support only.

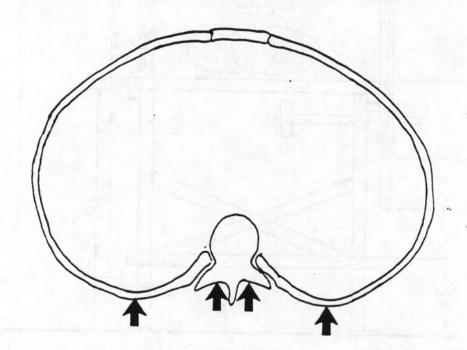
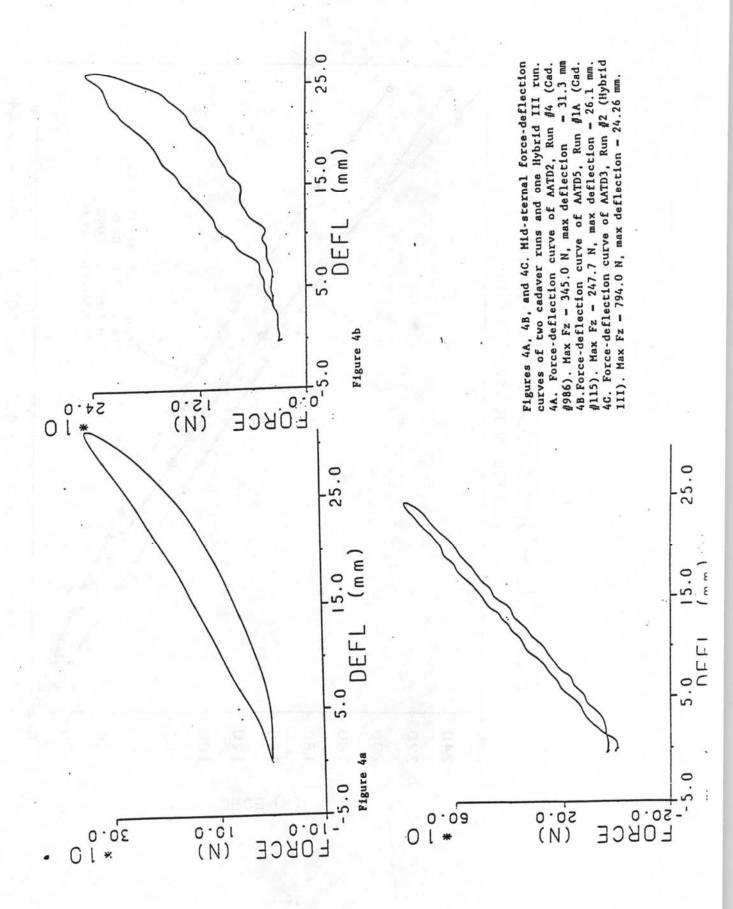


Figure 3B. Schematic chest cross-section showing rib plus spine support.



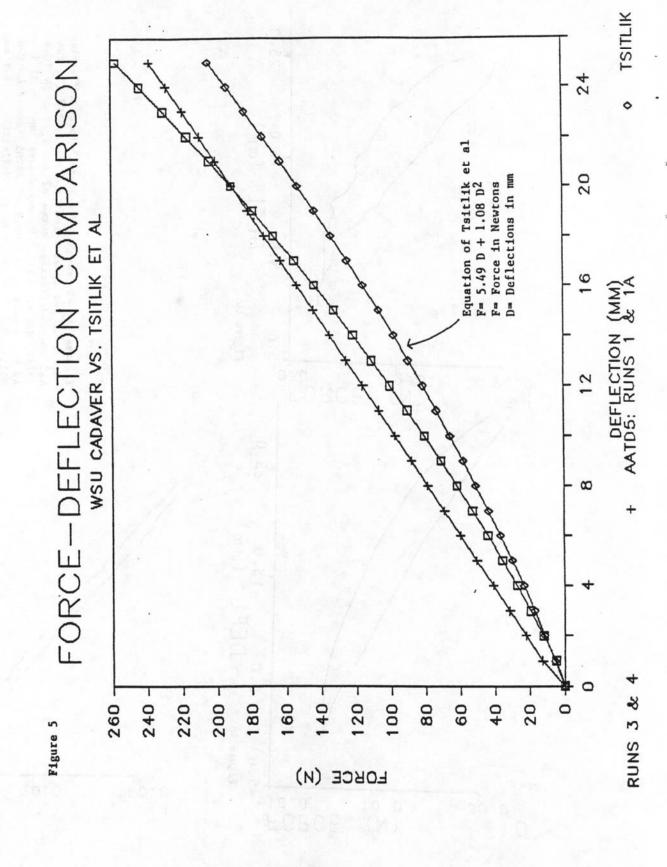


TABLE 2
THORACIC STIFFNESS FOR CADAVER TESTS AATD2 & AATD5

	US1 9.	. 067	MS1 0.	. 067	LS1 0.067		
TEST NAME RUN NO. SUBJECT	AATD2 & 5	AATD5	AATD2 & 5	AATD5	AATD5	AATD5	
RUN NO.	2:5,6 5:5,5A	11	2:3,4 5:1,14	R13#	7	15	
SUBJECT	CAD 986 &115	CAD 115	CAD 115	CAD 115	CAD 115	CAD 115	
BACK RIB SUPPORT?	NO	YES	NO	YES	NO	YES	
MAX. FORCE (N) MAX DEFL. (MM)	238.59	278.11	247.96	275.18	192.78	152.47	
MAX DEFL. (MM)	25.17	24.51	25.36	25.91	25.00	26.04	
STIFFNESS (N/MM)	9.16	11.35	9.78	10.62	7.71	5.86	
	US1 4.	. 8	MS1 4.	.0	LS1 4	.8	
TEST NAME RUN NO. SUBJECT	AATDS	AATDS	AATD5	AATD5	AATD5	AATDS	
RUN NO.	6	12	2.2A	14	8	16	
SUBJECT	CAD 115	CAD 115	CAD 115	CAD 115	CAD 115	CAD 115	
BACK RIB SUPPORT?	NO	YES	NO	YES	NO	YES	
MAX. FORCE (N)	182.50	267.78	212.16	207.91	157.51	154.95	
MAX DEFL. (MM)	24.73	24.77	24.67	25.68	25.82	26.22	
MAX. FORCE (N) MAX DEFL. (MM) STIFFNESS (N/MM)	7.38	18.81	8.68	8.10	6.30	5.91	
	UR1 8.367	UR1 4.9	MR1 8.867	MR1 4.0	LR1 8.867	LR1 4.8	
TEST NAME RUN NO. SUBJECT	AATD5	AATD5	AATD5	AATD5	AATD5	AATD5	
RUN NO.	25	26	21	22	17	18	
SUBJECT	CAD 115	CAD 115	CAD 115	CAD 115	CAD 115	CAD 115	
BACK RIB SUPPORT?	YES	YES	YES	YES	YES	YES	
MAX. FORCE (N) MAX DEFL. (MM) STIFFNESS (N/MM)	147.79	152.53	136.67	136.26	89.81	93.42	
MAX DEFL. (MM)	26.25	26.28	25.36	25.57	25.88	26.04	
STIFFNESS (N/MM)	5.63	5.83	5.39	5.33	3.42	3,59	

*R13: MAX FORCE SHOWN FOR R13 HAS BEEN INCREASED BY
(AVG MAX FORCE IN RUNS 1,1A)/(MAX FORCE IN RUN R1).
RUNS 1 & 1A WERE BEFORE RIB FRACTURE; R1 & R13 WERE AFTER RIB FRACTURE.

UR=UPPER RIB
US1 9.967=UPPER STERNUM LOADED TO 1° STROKE AT A RATE OF 3.067°/S
MR=MID RIB
US1 4.8 =UP ER STERNUM GADED TO 1° STROKE AT A RATE OF 4.8 °/S
LR=LOWER RIB
ETC.

TABLE 3
THORACIC STIFFNESS FOR HYBRID III TESTS AATD3 & AATD4

		US1 8	. 267	MS1	9.067.	LS1 8	. 067
٠	TEST NAME	AATD3	AATD4	AATD3	AATD4	AATD3	AATD4
	RUN NO.	6	11	2	7	10	15
	SUBJECT	HYB III	HYB III	HYB III	HYB III	HYB III	HYB III
	BACK RIB SUPPORT?	NO	YES	NO	YES	NO	YES
	MAX. FORCE (N)	685.28	735.28	794.88	874.88	688.25	668.16
	MAX DEFL. (MM)	25.40	25.48	25.40	25.40	25.48	25.40
	STIFFNESS (N/MM)	26.98	28.95	31.26	34.41	27.10	26.31
		US1 4	.0	MS1	4.8	LS1 4	. 0
	TEST NAME	AATD3	AATD4	AATD3	AATD4	AATD3	AATD4
	RUN NO.	7	12	4	8	12	16
	SUBJECT	HYB III	HYB III	HYB III	B HYB III	HYB III	HYB III
	BACK RIB SUPPORT?	NO	YES	NO	YES	NO	YES
	MAX. FORCE (N)	807.87	897.57	1894.85	1125.38	765.24	844.27
	MAX DEFL. (MM)	25.40	25.48	25.40	25.48	25.40	25.40
	STIFFNESS (N/MM)	31.81	35.34	39.58	44.31	30.13	33.24
		UR1 0.867	UR1 4.8	MR1 8.867	MR1 4.0	LR1 9.867	LR1 4.3
	TEST NAME	AATD4	AATD4	AATD4	AATD4	AATD4	AATD4
	RUN NO.	3	4	1	2	5	6
	SUBJECT	AATD4 3 HYB.III	HYB.III	HYB. III	HYB.III	HYB. III	HYB.III
	BACK RIB SUPPORT?	YES	YES	YES	YES	YES	YES
	MAX. FORCE (N)	885.68	831.54	1426.94	1863.86	1124.50	1584.48
	MAX DEFL. (MM)	25.48	25.48	25.48	25.40	25.48	25.48
	MAX DEFL. (MM) STIFFNESS (N/MM)	31.72	32.74	56.18	73.35	44.27	59.23

CODE

US=UPPER STERNUM UR=UPPER RIB
MS=MID STERNUM MR=MID RIB
LS=LOWER STERNUM LR=LOWER RIB

US1 8.867=UPPER STERNUM LOADED TO 1" STROKE AT A RATE OF 3.867"/S
US1 4.8 =UPPER STERNUM LOADED TO 1" STROKE AT A RATE OF 4.8 "/S
ETC.

TABLE 4

THORACIC DEFORMATION FOR CADAVER TEST AATDS

STERNUM LOADING.

LOADING RATE: 0.067 IN/S

MAX STROKE: 1.0 INCH SUPPORT CONDITIONS: SPINE SUPPORTED.

POSTERIOR RIBS SUPPORTED BILATERALLY. LOAD LOCATION IS SHOWN ABOVE EACH TABLE.

DEFLECTIONS ARE SHOWN IN INCHES AT EACH LOCATION.

NO. CADAVERS: 1 TESTS: AATD5: 11		LOAD POINT: NO. CADAVER TESTS: AATD			LOAD POINT: LOWER STERNUM NO. CADAVERS: 1 TESTS: AATDS: 15			
RIGHT RIBS	STERNUM	LEFT RIBS	RIGHT RIBS	STERNUM	LEFT RIBS	RIGHT RIBS	STERNUM	LEFT RIBS
2: 0.50	U: 1.00	2: 0.48	2:	U: M: 1.00	2: 0.37	2: 0.15	U: 0.16 M:	2: 0.26
5: 0.18	L: 0.35	5: 0.20	5: 0.31	L:	5: 0.30	5: 0.63	L: 1.00	5: 0.39
8: 0.06		8: 0.07	8: 0.18		8: 0.15	8: 0.57		8: 0.52

RIB LOADING. LOADING RATE: 0.067 IN/S MAX STROKE: 1.0 INCH SUPPORT CONDITIONS: SPINE SUPPORTED. POSTERIOR RIBS SUPPORTED BILATERALLY. LOAD LOCATION IS SHOWN ABOVE EACH TABLE. DEFLECTIONS ARE SHOWN IN INCHES AT EACH LOCATION.

NO. CADAVER: TESTS: AATD	S: 1	18	NO. CADAVER	LOAD POINT: RIGHT 5TH RIB NO. CADAVERS: 1 TESTS: AATD5: 21			LOAD POINT: RIGHT 8TH RIB NO. CADAVERS: 1 TESTS: AATD5: 17		
RIGHT RIBS	STERMUM	LEFT RIBS	RIGHT RIBS	STERNUM	LEFT RIBS		RIGHT RIBS	STERNUM	LEFT RIBS
2: 1.00	U: 0.31	2: 0.13	2: 0.08	U: 0.04 M:	2: 0.01	15.0	2: 0.00	U: 0.00	2: 0.00
5: 0.22	L: 0.24	5: 0.00	5: 1.00	L: 0.49	5: 0.09		5: 0.42	L: 0.42	5: 0.11
8: 0.05		8: 0.01	8: 0.40		8: 0.12		8: 1.00		8: 0.14

TABLE 5

THORACIC DEFORMATION FOR HYBRID III TEST AATD4

STERNUM LOADING.
LOADING RATE: 0.067 IN/S
MAX STROKE: 1.0 INCH
SUPPORT CONDITIONS: SPINE SUPPORTED.
POSTERIOR RIBS SUPPORTED BILATERALLY.
LOAD LOCATION IS SHOWN ABOVE EACH TABLE.
DEFLECTIONS ARE SHOWN IN INCHES AT EACH LOCATION.

LOAD POINT: UPPER STERNUM HYBRID III TESTS: AATD4: 11		LOAD POINT: MID STERNUM MYBRID III TESTS: AATD4: 7			LOAD POINT: LOWER STERNUM HYBRID III TESTS: AATD4: 15			
RIGHT RIBS	STERNUM U: 1.0	LEFT RIBS	RIGHT RIBS	STERNUM	LEFT RIBS	RIGHT RIBS	STERNUM U: 0.41	LEFT RIBS
3: 0.44		3: 0.48	3: 0.54	M: 1.0	3: 0.55	3: 0.34		3: 0.38
6: 0.32	L: 0.52	6: 0.34	6: 0.53		6: 0.59	6: 0.47	L: 1.0	6: 0.53

RIB LOADING.

LOADING RATE: 0.067 IN/S

MAX STROKE: 1.0 INCH

SUPPORT CONDITIONS: SPINE SUPPORTED.

POSTERIOR RIBS SUPPORTED BILATERALLY.

LOAD LOCATION IS SHOWN ABOVE EACH TABLE.

DEFLECTIONS ARE SHOWN IN INCHES AT EACH LOCATION.

LOAD POINT: RIGHT : HYBRID III TESTS: AATD4: 3	IST RIB	LOAD POINT: RIGHT 3RD RIB HYBRID III TESTS: AATD4: 7			LOAD POINT: RIGHT 6TH RIB HYBRID III TESTS: AATD4: 5			
1: 1.0 U: 0.		RIGHT RIBS	STERMUM U: 0.67	1: 0.29	1 1 • 1	RIGHT RIBS	STERMUM U: 0.33	LEFT RIBS
3: 0.50	3: 0.19	3: 1.0		3: 0.24		3: 0.56		3: 0.15
6: 0.33 L: 0.	.32 6: 0.09	6: 0.74	L: 0.68	6: 0.25		6: 1.0	L: 0.67	6: 0.26

DISCUSSION

PAPER: Quasi-Static Frontal Loading to the Thorax of Cadavers and Hybrid III Dummy

SPEAKER: J.M. Cavanaugh, Wayne State University

Q: Ted Kennedy, Consulting Engineer

I don't think you determined during your testing, but is it conceivable, with an air bag for loading in the frontal area, to get rib fractures in the back without any in the front? You have good distribution of the loading in the front, and actually flex the ribs.

A: Cavanaugh

I haven't been involved in any dynamic pendulum type tests but I don't think they showed posterior rib fractures. Maybe somebody else could verify that?

A: Guy Nusholtz, Chrysler

I've seen fractures in the back very near the spine with impacts to the front. But normally you also have fractures in the front as well, and you have to hit them fairly severely.

Q: Guy Nusholtz, Chrysler

You showed a curve where you said the response was nonlinear. Did perhaps part of the cadaver yield or fracture and that was the result. Did you check that?

- A: With one inch strokes we didn't get rib fracture. During strokes we heard rib fracture and verified that with autopsy. I think for these cases which were one inch, it wasn't due to fracture.
- Q: It could have been some hysteresis not related to a fracture phenomenon? It looked pretty linear when it went straight out. It didn't seem to show any indication of yielding.
- A: Well there were two up there I didn't really concentrate too much on the first one. The first one was more nonlinear than the second one. The second order curve is pretty flat; comparable to what has been seen in live volunteers.
- Q: Are you attributing nonlinearity to the fact that it doesn't come back down the rise line? It looked like a straight line to me. It looked linear on the rise and then it had a hysteresis coming back.
- A: We ran a linear and nonlinear fit through the rising portion

of the curve and a nonlinear fit better. The linear fit was still close. The correlation coefficient was quite good for the linear fit but quite a bit better for the nonlinear fit. For the unloading portion, which we haven't checked, I think a third order equation looks like it might fit the unloading portion better than the second order equation.